



NOTES

ANXIETY DISORDERS

GENERALLY, WHAT ARE THEY?

PATHOLOGY & CAUSES

- Mental disorders characterized by **excessive, unreasonable fear**, distress
- May be omnipresent/in response to particular stimulus
- Awareness of condition often causes more distress

CAUSES

- May be genetic, environmental
- Often associated with other mental disorders (mood, substance-related)

SIGNS & SYMPTOMS

- Persistent fear/distress
- Nausea, difficulty sleeping, headache

DIAGNOSIS

- Excessive, unreasonable fear/distress
- Struggle to control symptoms
- Lasts > six months
- Affects day-to-day functioning
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- Selective serotonin reuptake inhibitors (SSRIs), other antidepressants, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy
 - Identify, explain thoughts/feelings, change flawed ones
 - Better long-term prognosis; no side effects, no dependency

VISIT...

LANZAROTE
Caliente.COM

AGORAPHOBIA

osms.it/agoraphobia

PATHOLOGY & CAUSES

- Fear, avoidance of public places
- Individuals refuse to leave "safety" of home

CAUSES

- May be genetic, environmental
- Associated with other anxiety disorders, e.g. panic disorder

SIGNS & SYMPTOMS

- Fast heartbeat, dizziness, trembling
- Thinking about/avoidance of public places causes distress

DIAGNOSIS

- Unreasonable fear/anxiety associated with public places
- Caused by underlying fear of feeling trapped, unable to receive help
- Resulting avoidance of public places
- Lasts > six months
- Distress affects day-to-day functioning
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- SSRIs, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy, systematic desensitization

PANIC DISORDER

AVOIDANCE ~ AVOID PLACES

- ↳ temporary relief
- ↳ makes daily life hard

* ANTICIPATORY ANXIETY *

[endure attacks
alone]



AGORAPHOBIA



Figure 90.1 Illustration showing how other disorders can lead to agoraphobia. If someone with panic disorder has panic attacks outside frequently, they may develop agoraphobia and avoid going outdoors altogether.

GENERALIZED ANXIETY DISORDER

osms.it/generalized-anxiety-disorder

PATHOLOGY & CAUSES

- Excessive, unreasonable, **persistent fear, distress**

CAUSES

- May be genetic, environmental; higher in some groups
- Associated with depressive disorders

SIGNS & SYMPTOMS

- Restlessness**, difficulty concentrating, irritability
- Muscle tension** (→ aching and soreness), fatigue, insomnia (→ chronic fatigue)

DIAGNOSIS

- Excessive, unreasonable anxiety
- Struggle to control anxiety
- Persistent fear/distress, nausea, difficulty sleeping, headache
- > three symptoms listed above (children > one year old)
- Lasts > six months**
- Distress affects day-to-day functioning
- Not explained by other condition/substance

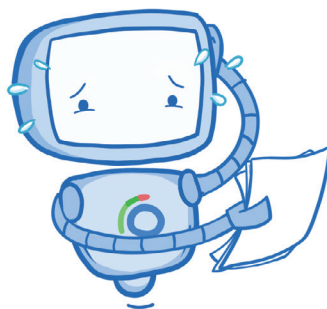
TREATMENT

MEDICATIONS

- SSRIs, antidepressants, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy



GENERALIZED ANXIETY DISORDER (GAD)

EXCESSIVE ~ more than someone else

PERSISTENT ~ doesn't go away

UNREASONABLE ~ shouldn't be worried

ANXIETY ABOUT EVERYDAY THINGS



Figure 90.2 Illustration of the different levels of anxiety.

PANIC DISORDER

osms.it/panic-disorder

PATHOLOGY & CAUSES

- Recurrent panic attacks → sudden periods of intense fear/discomfort
- Attacks unpredictable

CAUSES

- May be genetic, environmental; higher in some groups
- Associated with major depressive disorder, social and generalized anxiety disorders, obsessive-compulsive disorder

SIGNS & SYMPTOMS

- Feelings of choking, derealization, fear of losing control/dying
- Elevated heart rate, chest pain/discomfort, sweating, trembling, shortness of breath, nausea, dizziness, chills, numbness

DIAGNOSIS

- Recurrent, unpredictable panic attacks (> two)
- Distress affects day-to-day functioning
- Behavioral changes to avoid further attacks
- Presence of > four symptoms
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- SSRIs and other antidepressants, benzodiazepines
- Antiseizure medications

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy

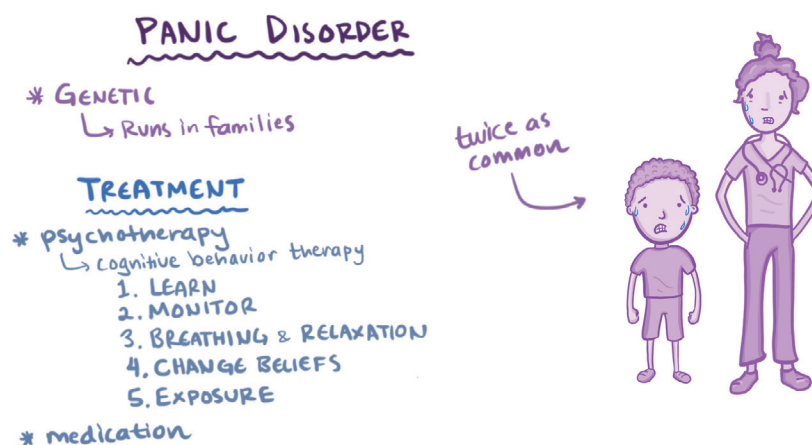


Figure 90.3 Illustration showing possible causes for panic disorder, and avenues to treatment.

PHOBIAS

osms.it/phobia

PATHOLOGY & CAUSES

- Excessive, unreasonable, persistent fear resulting in avoidance of particular object/situations (phobic stimulus)

TYPES

- As listed in the DSM-5
 - Fear of animals
 - Fear of natural environment
 - Fear of blood, needles
 - Situational fears
 - "Other" fears (AKA none of the above)

CAUSES

- May be genetic, environmental
- Associated with anxiety, mood, substance use disorders

SIGNS & SYMPTOMS

- Response to phobic stimulus: elevated heartbeat, dizziness, trembling
- Excessive thinking about/avoidance of phobic stimulus causes distress

DIAGNOSIS

- Unreasonable fear/anxiety associated with phobic stimulus
- Resulting avoidance (which may itself cause distress) of phobic stimulus
- Lasts > six months
- Distress affects day-to-day functioning
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- SSRIs, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy, systematic desensitization

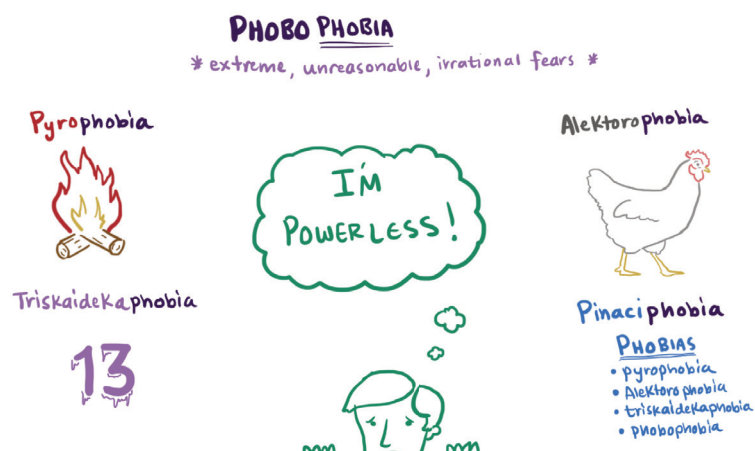


Figure 90.4 Illustration of different specific phobias making someone feel powerless.

SEPARATION ANXIETY DISORDER

osms.it/separation-anxiety-disorder

PATHOLOGY & CAUSES

- Excessive, unreasonable, persistent fear of being separated from individual/location

CAUSES

- May be genetic, environmental
- Associated with all other anxiety disorders

SIGNS & SYMPTOMS

- Distress caused by thought of experiencing separation
- Nightmares, headaches, nausea

DIAGNOSIS

- Excessive, unreasonable, persistent fear of being separated from individual/location
- **Adults:** lasts > six months
- **Children:** lasts > four weeks
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- SSRIs, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy

SOCIAL ANXIETY DISORDER

osms.it/social-anxiety-disorder

PATHOLOGY & CAUSES

- Excessive, unreasonable, persistent fear of being judged
- Avoidance of social situations

CAUSES

- May be genetic, environmental; higher in some groups
- Associated with mood disorders, substance-related disorders, eating disorders, obsessive-compulsive disorders

SIGNS & SYMPTOMS

- Trembling, blushing, derealization
- Excessive thinking about/avoidance of social situations/circumstances, associated distress

DIAGNOSIS

- Excessive, unreasonable, persistent fear of being judged
- Avoidance of social situations/circumstances, associated distress
- Fear of others judging anxious feelings
- Lasts > six months
- Distress affects day-to-day functioning
- Not explained by other condition/substance

TREATMENT

MEDICATIONS

- SSRIs, antidepressants, benzodiazepines

PSYCHOTHERAPY

- E.g. cognitive behavioral therapy

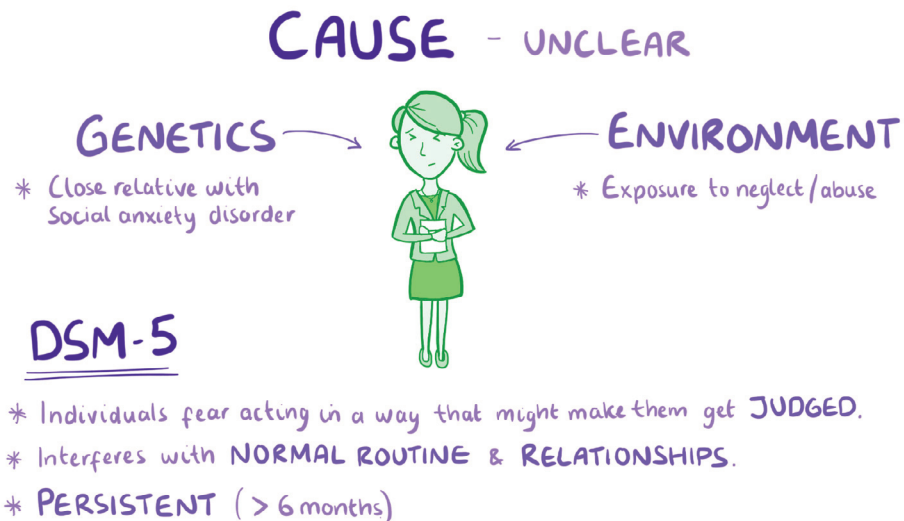


Figure 90.5 Illustration of the possible causes of social anxiety disorder, which are still unclear, as well as the DSM-5's criteria for a diagnosis of the condition.